Research letter

Why don't more women report sexual assault to the police?

Margaret J. McGregor, Ellen Wiebe, Stephen A. Marion, Cathy Livingstone

n estimated 94% of sexual assaults never come to the attention of the criminal justice system.¹ We examined data from the charts of all 958 individuals who were examined at the Sexual Assault Service between Jan. 1, 1993, and Dec. 31, 1997. This service is operated by the Children's & Women's Health Centre of British Columbia in partnership with the Vancouver General Hospital Emergency Department. The purpose of our study was to determine why so many sexual assault cases are not reported to the police.

Information on patient demographics, details of the assaults and results of the physical examinations were compiled and analysed. The relationship between police involvement and the circumstances of each case was examined using logistic regression. "Police involvement" was defined as police accompaniment to the BC Women's Sexual Assault Service, a request by the patient to file a police report at the time of the examination or both.

Age was not significantly associated with police involve-

ment. The presence of physical injury, the fact that the assailant was a stranger, socioeconomic status below the group median, the year of the assault and the assault taking place in Vancouver were variables significantly associated with police involvement (Table 1). In addition, the decision to involve police in a sexual assault case was usually made before the individual arrived in the emergency room (Fig. 1). Police involvement in these cases has decreased over time; the percentage of assault cases seen by the sexual assault service that involved the police was 76.7% in 1993, 73.3% in 1994, 66.7% in 1995, 69.9% in 1996 and 57.4% in 1997.

Our results suggest that women who have been raped by an assailant who is not a stranger and those who have no physical injuries following a rape are more reluctant to involve the police. The increased probability of police involvement when a woman is sexually assaulted by a stranger or when the victim has some physical injury is consistent with previous studies.³⁻⁵ This behaviour may reflect a com-

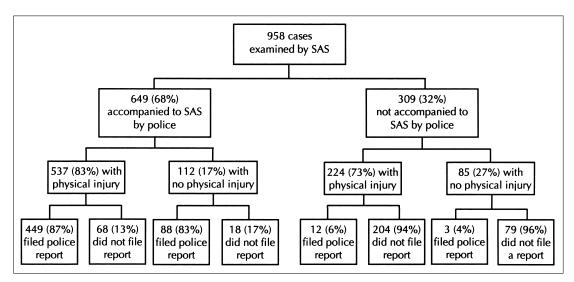


Fig. 1: Police involvement of 958 cases examined by the Sexual Assault Service (SAS) between Jan. 1, 1993, and Dec. 31, 1997. Of the 649 individuals accompanied to the SAS by the police, information about whether they filed a police report was missing for 26 cases; of the 309 who were not accompanied to the SAS, police report information was missing for 11.

Table 1: Factors associated with reporting sexual assault to the police

Variable	regression	Multivariate logistic regression OR (and 95% CI)
Stranger assailant	2.2 (1.6–2.9)	1.9 (1.3–2.7)
A documented injury SES below cohort median (3rd decile)†	1.9 (1.3–2.6) 1.7 (1.3–2.4)	2.1 (1.4–3.1) 1.5 (1.1–2.1)

Note: OR = odds ratio, CI = confidence interval, SES = socioeconomic status. *Multivariate model for police involvement associated with: year of assault (5 levels), location of assault Vancouver and the 3 variables noted in the table. †SES of individual was determined according to Wilkins.*

mon misconception that there should be some physical violence inflicted by a stranger for a rape to be considered "genuine." When an individual is confronted with a situation that does not conform to this widely held concept of what constitutes rape, she may be reluctant to report the incident, feeling that she is to blame or will not be believed. Although overwhelming evidence suggests that most sexual assaults involve someone who is known to the victim and do not result in physical injury, it is likely that this type of assault remains underreported, and this, in turn, reinforces the social myth of what constitutes rape. Ironically, there is growing evidence that it is precisely this type of rape profile that may lead to more severe emotional adjustment problems in the long run. 7-9

The reason for the declining rate of sexual assault reports to the police over the 5-year period we surveyed is not clear. It does, however, coincide with an increase in the proportion of women from outside Vancouver being treated by the service. These women may have chosen to come to Vancouver for examination and treatment because of the availability of post-HIV exposure prophylaxis or the relatively high-profile nature of the service. However, women from outlying communities are less likely to report an assault to the Vancouver police if the assault occurred outside the Vancouver area, and this may account for the declining rate. Regardless of how one interprets the trend, the reporting of sexual assault to police has not increased sexual assault continues to be one of the most under reported crimes.1 Reasons for this merit further study, possibly of a more qualitative nature.

We gratefully acknowledge Dr. Sue Comay, Anneke VanVliet, Dr. Sylvia Ducceschi and Carolyn Dudley, coordinators of the Sexual Assault Service who assisted in accessing the data and reviewing the protocol for this study, and Kim McGrail, Project Manager of the Health Information Development Unit of the the Centre For Health Services Policy Research, University of British Columbia, who assisted in determining income levels from postal code data.

This study was funded by the Research Affairs Office of the Vancouver Hospital and Health Sciences Centre.

Dr. McGregor is a Clinical Instructor, Department of Family Practice, Dr. Wiebe is a Clinical Associate Professor, Department of Medicine, Family Practice, Dr. Marion is with the Department of Health Care and Epidemiology, University of British Columbia, Vancouver, BC, and Ms. Livingstone is a researcher with the Capilano College Labour Studies Program.

Competing interests: None declared for Drs. McGregor, Wiebe or Marion. Ms. Cathy Livingstone was employed as a research assistant during this project.

References

- The violence against women survey. Ottawa: Statistics Canada; 1993. Cat no 11-001E.
- Wilkins R. Use of postal codes and addresses in the analysis of health data. Health Rep 1993;5(2):157-77.
- Renner KE, Wackett C, Ganderton S. The "social" nature of sexual assault. Can Psychol 1988;29(2):163-73.
- Feldman-Summers S, Norris J. Difference between rape victims who report and those who do not report to a public agency. J Appl Soc Psychol 1984;14(6): 562-73.
- those who do not report to a public agency. J Appl Soc Psychol 1984; 14(6): 302-73.

 Williams L. The classic rape: when do victims report? Soc Probl 1984; 31(4): 459-73.
- Renner KE, Wackett C. Sexual assault: social and stranger rape. Can J Commun Ment Health 1987;6(1):49-56.
- McCahill TW, Meyer LC, Fischman AM. The aftermath of rape. Lexington (MA): Lexington Books; 1979. p. 61.
- 8. Renner KE, Wackett C, Ganderton S. The "social" nature of sexual assault. Can Psychol 1988;29(2):163-73.
- Renner KE, Wackett C. Sexual assault: Social and stranger rape. Can J Commun Ment Health 1987;6(1):49-56.

Reprint requests to: Dr. Margaret McGregor, Mid-Main Community Health Centre, 3998 Main St., Vancouver BC V5V 3P2; fax 604 875-8790; mrgret@interchg.ubc.ca